Schizophrenia scale (CGI-SCH) Treatment adherence, concomitant medication, and the number of hospitalizations. Efficacy values: Percentage of patients who remained free of admissions at the end of 60 months of follow-up. Other evaluation criteria: Average change from baseline visit to the final evaluation as assessed by score obtained on the following scale: GSI-SCH; percentage of patients on antipsychotic monotherapy, and treatment adherence rate.
Results: The percentage of patients who remained free of admissions at the end of the 60 months was 83.25%. Mean variations from baseline scores at 60 months were: (-0.36 ±0-37) on the GCI-SCH. The rate of adherence to treatment with PP3M after 60 months was 86.58%.
Conclusions: In our study, we found that paliperidone palmitate 3-month formulation effectively prevents admissions under daily clinical practice conditions.

Disclosure: No significant relationships.
Keywords: hospital admissions; Paliperidone Palmitate 3-month formulation; schizophrénia; Efficacy

EPP0489

Clozapine and urinary incontinence

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Introduction: Clozapine is an atypical antipsychotic, which has been shown to have superior efficacy in the remission of positive and negative symptoms in patients with treatment-resistant schizophrenia, compared to other antipsychotics. However, its benefits have been limited by the lethal adverse effects that this drug can cause, the most common, agranulocytosis. Other less serious and more common adverse effects are sedation, hypersalivation, hypo and hypertension, weight gain and urinary incontinence. It is estimated that approximately 1% of patients treated with Clozapine suffer from urinary incontinence. Data that varies from 0.3% to 42% in the articles reviewed, being undervalued in some of these for many reasons; it is stigmatizing and the patient is ashamed to express it.
Objectives: The objective of this study is to assess the percentage of urinary incontinence in patients in treatment with clozapine, taking into account the presence or absence of this side effect as the main variable, and the diagnosis, gender and dose of clozapine as secondary variables.
Methods: A retrospective observational study was carried out in which 40 patients belonging to the Adult Mental Health area of the Nuestra Señora del Prado Hospital, were collected, all of them diagnosed with some type of psychotic disorder and undergoing treatment with Clozapine.
Results: Of the total of patients studied, 25% presented urinary incontinence as an adverse effect, and of these, 60% were with doses equal to or greater than 400 mg of Clozapine.
Conclusions: We must be careful and bear this side effect in mind in all patients taking Clozapine.

Disclosure: No significant relationships.
Keywords: urinary incontinence; adverse effects; clozapine; schizophrénia

EPP0492

Immune-related genes are differentially associated with negative symptoms subdomains in patients with schizophrenia

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Introduction: Negative symptoms (NS) are a core feature of schizophrenia. NS show heterogeneity proven by factor analysis, which revealed two distinct negative symptoms subdomains: diminished expression (DE) and avolition/apathy (AA) (Marder et al. 2017, Fleischhacker et al. 2019). Some studies showed the different effects of these subdomains on clinical features of schizophrenia that suggest different pathophysiological mechanisms for their development (Stanculete 2021). It has been also shown that the levels of peripheral interleukins (IL) specifically correlate with NS (Enache et al. 2021), in particular, increased IL levels were determined in patients with deficit syndrome compared to non-deficit schizophrenia (Goldsmith et al. 2018).
Objectives: To search for the association of genes for IL-4, IL-6, IL-10 and C-reactive protein (CRP) with NS subdomains.
Methods: The total sample included 551 patients (women 51,4%, aged 18-72 years) with ICD-10 diagnosis of schizophrenia. NS were assessed by PANSS. PANSS-derived factors include AA (items N2, N4, G16) and DE (N1, N3, N6, G5, G7, G13). Genotyping was performed for the following polymorphisms: C-589T IL-4, C-174G IL-6, C-592A IL-10, G-1082A IL-10, CRP (rs2794521).
Results: There are effects of C-592A IL-10 (p=0.017) and G-1082A IL-10 (p=0.012) on AA subdomain. Post-hoc Bonferroni corrected comparisons show that carriers of the haplotype AA (C-592A)- AA (G-1082A) have the highest AA score. A significant effect of CRP (rs2794521) on AA is identified (p=0.007). There is a trend towards the association of C-589T IL-4 and C-174G IL-6 with AA. No association of these polymorphisms with DE was found.
Conclusions: AA and DE may have different genetic background.

Disclosure: No significant relationships.
Keywords: immune-related genes; negative symptoms; schizophrénia

EPP0494

Superoxide dismutase activity of serum IgG in acute illness and remission period of schizophrenia

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Introduction: According to recent research violations of the oxidative-antioxidant balance may play an important role in the pathogenesis of schizophrenia, by changing generate, conduct and reproduce a nerve impulse. Antibodies with oxidoreductase activity may be involved in protection against oxidative stress in schizophrenia.
Objectives: The study was to compare the superoxide dismutase (SOD) activity of IgG in patients with acute schizophrenia and during remission.
Methods: The study included 20 patients with acute schizophrenia (mean PANSS total score 94,3±14), 18 people with schizophrenia during remission (mean PANSS total score 54,7±9), and 10 healthy individuals. All participants signed informed consent for the research. Isolation of IgG from blood serum was performed using affinity chromatography on Protein-G-Sepharose columns. The homogeneity of the substances is confirmed by the SDS PAGE method. SOD activity of IgG was carried out spectrophotometrically. Statistical processing was conducted with Statistica v.10.
Results: IgG of schizophrenia patients and healthy individuals have a SOD activity and studied activity is proved to be antibodies intrinsic property. The activity of antibodies in acute schizophrenia was 1.7 times higher than in healthy individuals ($p<0.05$). In patients with schizophrenia during remission SOD activity of IgG was 2.4 times higher than in healthy individuals ($p<0.05$).
Conclusions: We can assume that in the conditions of oppression antioxidant activity in schizophrenia patients, antibodies partially take over the function of protecting the body from patients with generalized oxidative stress. *This work is supported by the Russian Scientific Foundation, grant # 18-15-00053P.*

Disclosure: No significant relationships.
Keywords: oxidative stress; schizophrenia; IgG

EPP0497

Molecular diagnosis of cytogenetic abnormalities in patients with schizophrenia.

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Introduction: Schizophrenia is a severe and chronic disorder causing significant disability and functional decline. Schizophrenia is a polygenic disease, with about 100 monogenic sites and 11 sites of chromosomal deletions / duplications involved in its pathogenesis identified. It is a pleiotropic disease, with causative genetic changes leading to multiple symptoms, including bipolar disorder, autism spectrum disorders, ADHD, mental retardation and epilepsy. The chromosomal microarray (CMA) technology detects submicroscopic chromosomal changes, which are involved in neurodevelopmental disorders, and are subject to prenatal diagnosis. Pathological findings in CMA are detected in 10-20% of patients with neurodevelopmental disorders and can contribute significantly to medical follow-up, prognosis assessment, influence treatment choice, and allow prenatal diagnosis. Preliminary studies in schizophrenia identified pathological CMA findings in 10–30% of patients.
Objectives: CMA testing of schizophrenia patients to detect genetic changes causing the disease.
Methods: Recruitment of schizophrenia patients from the Haifa and Western Galilee districts of Clalit, genetic counseling in Carmel Hospital, CMA testing of the consenting patients.
Results: Schizophrenia patients with and without neurodevelopmental disorders underwent CMA analysis, with the findings of significant chromosomal submicroscopic disorders (such as 22q11 microdeletion, among others) in 30% of the patients, providing the explanation for the patients' symptoms and enabling specific medical follow-up and adjusted pharmacological treatment.
Conclusions: CMA can be used in diagnosing schizophrenia, assessing prognosis, adjusting pharmacological treatment and follow-up and providing genetic counseling including prenatal diagnosis, as in cases neurodevelopmental disorders. The findings support the application of CMA as part of a routine procedures in schizophrenia.

Disclosure: No significant relationships.
Keywords: Schizophrenia; Cromosomal abnormalities; CMA; diagnosis

Comorbidity/Dual Pathologies / Consultation Liaison Psychiatry and Psychosomatics 02

EPP0498

Polymorphism rs1108580 in DBH gene is associated with the risk of depression in alcohol-dependent patients

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Introduction: Alcohol dependence and depression are often combined, patients with comorbid pathology have a more severe course of the disease, a high risk of suicide and therapeutic resistance. Enzyme dopamine-beta-hydroxylase (DBH) is a key player in a link between dopamine and norepinephrine neuromediations and may be involved in alcohol dependence and depression comorbidity and genetic markers in DBH gene may be associated with the risk of comorbid state.
Objectives: To test an association of DBH gene polymorphisms rs161111580 and rs1108580 with depression risk in alcohol-dependent patients.
Methods: Our sample consisted of 104 inpatients diagnosed by ICD-10 criteria: 40 with alcohol dependence (AD group) (age 45.6 (SD 10.853), 5% females), 64 with depression and alcoholism